## NOTICE OF FEE DUE

DATE:	8/12	104			
TO:	<u> </u>	Sue	Fee		
FROM:	Office of Initial Pater	nt Examination	1		
SUBJECT:	Fee Due				
APPLICATION	NUMBER 10,6	613,32	3		
Office for the authorization to	or the attached docume following reason. Plea to charge a deposit acc te. If an authorization	ase check the sount. If an au	application: thorization		ne ncy.
Insufficien	t fee by check				
Insufficient	t funds in deposit amour	nt			
Declined ca	redit card	•			
Non-author	rization for charge to dep	posit account			
☐ No fee sub	mitted per requirement				
The correct fee	code:		amount	\$	-
The suspended f	ee code: 1999		amount	\$	
Fee Due			amount	=\$	
If you have any e Eleanor Kurtz 70	questions, please contact 03-308-3642	t Cynthia Streat	er at 703-306	5-5430 or	
Torminal Onorat	.~~	SIA	9	4	

